

**ACH VENDOR/MISCELLANEOUS PAYMENT  
ENROLLMENT FORM**

OMB No. 1510-0056

This form is used for Automated Clearing House (ACH) payments with an addendum record that contains payment-related information processed through the Vendor Express Program. Recipients of these payments should bring this information to the attention of their financial institution when presenting this for completion.

**PRIVACY ACT STATEMENT**

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data, by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

**AGENCY INFORMATION**

OJP Grant Number/s:

AGENCY IDENTIFIER: OJP	AGENCY LOCATION CODE (ALC): 15-04-0001	
ADDRESS: 810 Seventh Street, NW Attn: Office of the Comptroller Control Desk  Washington D.C. 20531		
CONTACT PERSON NAME: Office of the Comptroller Customer Service Center		TELEPHONE NUMBER (800) 458-0786
ADDITIONAL INFORMATION:		

**PAYEE/COMPANY INFORMATION**

OJP Vendor Number:

NAME:	
ADDRESS:	
Grantee E-mail (Payment Notification) address:	
CONTACT PERSON NAME:	TELEPHONE NUMBER: ( )

**FINANCIAL INSTITUTION INFORMATION**

NAME:	
ADDRESS:	
ACH COORDINATOR NAME:	TELEPHONE NUMBER: ( )
NINE-DIGIT ROUTING TRANSIT NUMBER:	
DEPOSITOR ACCOUNT TITLE:	
DEPOSITOR ACCOUNT NUMBER	LOCKBOX NUMBER:
TYPE OF ACCOUNT:  CHECKING                      SAVINGS                      LOCKBOX	
SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL: (Could be the same as ACH Coordinator)	TELEPHONE NUMBER: ( )

NSN 7540-01-274-9925

3881-102

SF3881 (Rev. 12/90)  
Prescribed by Department of Treasury  
33 U S C 3322: 31 CFR 210

**AGENCY COPY**